

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 06, 2003 8:00 am  
Secretary of State

02-06-2003 90095 022 \*\*\*150.00

DOCUMENT # **P97000057298**

1. Entity Name  
**BIZICK ENTERPRISES, INC.**



Principal Place of Business  
**685 ROYAL PALM BEACH  
SUITE 105  
ROYAL PALM BEACH FL 33411**

Mailing Address  
**685 ROYAL PALM BEACH  
SUITE 105  
ROYAL PALM BEACH FL 33411**

**22004229**



2. Principal Place of Business  
**1300 Corporate Center Dr**  
Suite, Apt. #, etc.  
**Suite 1050**

3. Mailing Address  
**1300 Corporate Center Dr**  
Suite, Apt. #, etc.  
**Suite 1050**

City & State  
**Wellington FL**

City & State  
**Wellington FL**

4. FEI Number **65-0764328**

Applied For  
Not Applicable

CHECK HERE IF MAKING CHANGES

Zip **33414** Country

Zip **33414** Country

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BIZICK, RONALD G  
685 ROYAL PALMS BEACH BLVD  
SUITE 105  
ROYAL PALM BEACH FL 33411**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
**1300 Corporate Center Dr**  
**#1050**  
City **Wellington** FL Zip Code **33414**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP**  Delete  
NAME **BIZICK, RONALD G**  
STREET ADDRESS **685 ROYAL PALM BEACH 1300 Corporate Center Drive**  
CITY-ST-ZIP **ROYAL PALM BEACH FL 33411 Wellington FL 33414**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D**  Delete  
NAME **BELSKI, MICHAEL**  
STREET ADDRESS **13343 KINGSBURY DR**  
CITY-ST-ZIP **WELLINGTON, FL 33414**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Ronald G. Bizick** **2-4-03** **561-793-8400**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)